

Empirical Evidence for the Expressive-Collaborative Model of Morality and Its  
Implications for Healthcare Ethics Consultation

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## List of Abbreviations

HCEC: Healthcare Ethics Consultation

TJM: Theoretical-Juridical Model

ECM: Expressive-Collaborative Model

SIM: Social-Intuitionist Model

## Introduction

Healthcare ethics consultation (HCEC) has reached a critical moment in its history. HCEC aims to help patients and healthcare providers identify, navigate, and resolve ethical questions, conflicts, and concerns as they arise in the clinical setting. Nearly 81% of hospitals overall and 100% of hospitals over 400 beds offer HCEC services.<sup>1</sup> Despite the prevalence and importance of HCEC, healthcare ethics (HCE) consultants currently have no standardized training requirements or educational standards. However, the HCEC community has built momentum to better define the role of HCE consultants, to develop standardized approaches to HCEC, and to establish educational standards for training future HCE consultants. These efforts have culminated in plans to role out a trial accreditation system within the next year.<sup>2</sup> As Jeffery Spike writes, “the year 2013 may someday be seen as the year a new profession was born.”<sup>2</sup> (p20)

In order to develop accreditation and education standards for future HCE consultants, it is critical to identify the best approach to HCEC. Identifying the best approach to HCEC includes defining the goals of HCEC and establishing approaches and strategies that meet these goals.

Once the optimal approach to HCEC is established, educators must define the skill and knowledge bases necessary to implement that approach. There is general agreement that well-trained HCE possess unique expertise. However, accreditation requires precisely defining which skills and knowledge bases are required. Only after precisely defining the composition of the expertise required

of competent HCE consultants can educational and assessment strategies be established.

When trying to identify the best approach to HCEC and the composition of HCEC expertise, broader theoretical questions emerge. Many of these questions pertain to moral epistemology: questions about the nature, scope, and justification of moral knowledge. What does moral knowledge look like, and how is moral knowledge obtained? What assumptions do we hold, both implicitly and explicitly, about the nature of morality, and are those assumptions valid?

These tacit assumptions held about the nature of morality influences the way consultants approach HCEC. Kathrin Ohnsorge and Guy Widdershoven argue that “the way we approach clinical ethical problems in practice...depend[s] on the epistemological and anthropological premises from which we start.”<sup>3</sup> They note that “these presuppositions are not specific bioethical theories, but basic assumptions which inform the way in which we see the world and act in it.”<sup>3</sup> Ohnsorge and Widdershoven articulate their stance on the importance of seeking an accurate moral epistemology with clarity:

We believe that the presuppositions of the way of working in [HCEC] are more important than the theories used; these presuppositions lead to different ways of using theories, based on different epistemological and anthropological grounds – leading to different results.<sup>3</sup>

Because our tacit assumptions about the nature of morality influence the way we practice, and thus the results of our practice, HCEC would benefit from the pursuit of an accurately reflection of how people experience morality in real space and time.



With the hopes of guiding the future development of HCEC, this paper attempts to better understand the nature of morality by integrating moral psychologist Jonathan Haidt's theory of human functioning in moral contexts with Margaret Urban Walker's work in moral philosophy. First, I present Margaret Urban Walker's two contrasting philosophical views of morality: the theoretical-juridical model (TJM) of morality and the expressive-collaborative model (ECM) of morality. The TJM describes morality as an attempt to approximate a timeless, universal moral reality into rationally codifiable laws, procedures, or principles to guide individual behavior. Conversely, the ECM describes morality as a human social phenomenon that arises out of ongoing negotiations between people over their responsibilities. I will then argue that evidence from moral psychology might contribute to this philosophical debate.

Second, I present evidence suggesting that traditional models of how people make moral judgments overestimate the causal role of reasoning and underestimate the causal role of emotions. I then briefly summarize several domains of research that must be included in a comprehensive model of moral judgment, including research in from affective processing, automaticity, neuroscience, evolutionary theory, cultural psychology, and primatology. Based on this research, I argue that a comprehensive model of moral judgment should 1) reconsider the traditionally held relationship between moral intuitions and moral reasoning, and 2) explicitly recognize that moral judgment is an ongoing social phenomenon arising in response to the evolutionary challenges of managing social life.

Third, I present a model of moral judgment that I believe meets these two criteria: Jonathan Haidt's social intuitionist model (SIM) of moral judgment. The first major claim of the SIM is that an individual's initial moral judgments appear suddenly and automatically in consciousness without deliberately having searched, weighed evidence, or inferred a conclusion. These moral intuitions are then followed by post hoc moral reasoning, or the conscious search for supporting evidence. The second major claim is that moral judgment is an ongoing social process that occurs over time and between multiple people. Then, returning to Margaret Urban Walker's work on the nature, source, and justification of moral knowledge, I argue that the SIM supports the validity of the ECM for two reasons. First, the fact that individual moral judgments are not made by rationally applying moral theories to specific cases undermines a central tenant of the TJM. Furthermore, the ECM recognizes that moral judgment is an ongoing social phenomenon arising out of the challenges inherent to social life.

Finally, I discuss how the SIM can be applied to HCEC to guide practice. I will present three approaches to HCEC that have described in the literature: 1) the authoritarian approach, 2) the pure consensus approach, and 3) the ethics facilitation approach. Using the SIM as a framework for the discussion, I argue that the authoritarian approach is prone to biased moral judgments, and therefore should be rejected, but that the pure consensus and ethics facilitation approaches are both compatible with the SIM. Both approaches require consultants to facilitate a moral discussion by mediating the interpersonal links in the SIM. However, the ethics facilitation approach also allows consultants to

share their own moral intuitions, judgments, and reasoning in the discussion. The ethics facilitation approach therefore implies that HCE consultants have some sort of expertise that warrants the sharing of their intuitions, judgments, and reasoning. I argue that if this expertise truly exists, it would present itself as nuanced moral intuitions that are developed through clinical experience, rather than through an ability to better deduce what ought to be done. In the concluding chapter, I discuss how this might influence how HCE consultants are trained and accredited.

Overall, this paper should be seen as the start of a new discussion rather than an answer to an old one. Certainly, the claims made by Walker and Haidt are bold and subject to ongoing debate. I, however, find their views convincing. Furthermore, to my knowledge, there have been no attempts in the HCEC literature to ground the practice of HCEC in a psychological model of how people make moral judgments. I firmly believe that understanding *how* people make moral judgments, and where consultants fit into that process, is centrally important to HCEC. Our views of how people make moral judgments changes how HCE consultants practice and are trained and educated, and is of primary importance for this nascent profession.

## Chapter 1

In this chapter, I summarize the work of Margaret Urban Walker, who presents two contrasting views of the nature, source, and justification of moral knowledge: the theoretical-juridical model (TJM) of morality and the expressive-collaborative model (ECM) of morality. These two views differ fundamentally, and it would be useful to determine which model more accurately represents the nature of morality. After describing Walker's two models, I argue that a synthesis of relevant research from fields outside of moral philosophy may advance this ongoing philosophical debate.

### **The Theoretical-Juridical Model of Morality**

In Margaret Urban Walker's book *Moral Understandings: A Feminist Study in Ethics*,<sup>4</sup> Walker addresses the question of the nature, source, and justification of moral knowledge. Her project challenges common philosophical views about "what moral knowledge is like, where to look for it, and how to tell when you've found some."<sup>4</sup> (p4)

Walker begins her study of moral epistemology by describing the prevailing view of morality in moral philosophy, which she calls the theoretical-juridical model (TJM). The TJM is not a moral theory itself, but a framework of morality and moral inquiry that has prevailed in Western philosophy since the 20<sup>th</sup> century. The TJM "prescribes morality as a compact, propositionally codifiable, impersonally action-guiding code within an agent, or as a set of law-like propositions that 'explain' the moral behavior of a well-formed moral agent...by 'explaining' what should happen."<sup>4</sup> (p7-8) As Walker states, "many utilitarian,

contract, neo-Kantian, or rights-based theories that are otherwise diverse and contradict each other can be seen to realize or approximate the theoretical-juridical model.”<sup>4</sup> (p7)

The TJM implies the existence of a timeless, universal moral reality that **transcends** human experience. Walker argues that the TJM considers philosophical reflection on morality as “not ‘merely’ reflecting on [one’s] own moral experience.”<sup>4</sup> (p5) Instead, the TJM suggests that philosophical reflection “[taps] into a moral reality, or the moral realm, or the structure of practical reason, or the nature of the right and the good.”<sup>4</sup> (p5) Inherent to this view of philosophical reflection is the assumption “that the moral reality, realm, nature, or structure is something accessible and determinate quite apart from anyone’s acquired experience.”<sup>4</sup> (p5)

The TJM sees moral theories as attempts to approximate moral reality into codifiable laws, procedures, or principles to guide individual behavior. As Walker **describes**, “moral theories try to ‘represent’ the ideal capacity of the well-equipped moral agent...in a codifiable, compact, consistent set of procedures for generating or justifying action-guiding judgments.”<sup>4</sup> (p36-37) The central aim of moral philosophy, therefore, relates to the “discovery/construction, testing, comparison, and refinement of moral theories.”<sup>4</sup> (p37) The construction and revision of moral theories aims to better “exhibit the essential core of pure or proper moral knowledge,”<sup>4</sup> (p37) therefore yielding optimal moral judgments to guide individual behavior.

In this way, the TJM represents morality as the pursuit of a kind of formal knowledge. As Walker writes:

[The TJM] demotes a great deal of what is known, felt, and acted out in moral relations to “nonmoral” – merely factual or collateral – information. It shrinks morality “proper” down to a kind of purified core of purely moral knowledge.<sup>4 (p8)</sup>

Factual information about social arrangements, conventions, or expectations is minimized. Instead, the TJM views morality as the pursuit of a purified core of moral knowledge, which is obtainable through reason and codified into moral theories. In this way, moral knowledge manifests itself as knowledge of moral theories, how to reason using them, and how to apply them to specific cases.

### **The Expressive-Collaborative Model of Morality**

Walker challenges the accuracy of the TJM. She proposes an alternative view quite distinct from the TJM, which she calls the expressive-collaborative model (ECM). The ECM views morality as “a socially embodied medium of mutual understandings and negotiation between people over their responsibility for things open to human care and response.”<sup>4 (p9)</sup> Central to the ECM, and in contrast to the TJM, morality does not transcend human experience. Instead, morality is embedded in social practices; it is generated and sustained by everyday social life, arising out of and reproduced or modified by interactions between people.

Walker proposes four hypotheses about morality related to the ECM. First, she hypothesizes that morality consists in practices, not theories. Walker does not mean to suggest that theories about morality are unnecessary or meaningless. Rather, she reiterates that “theories of morality should not be

confused with morality [itself], the human social phenomenon the theories are about.”<sup>4</sup> (p15) Under the ECM, “theories of morality are attempts to find out what people are doing in bringing moral evaluation to bear...on what they and others do and care about, and whether some ways...are better ways than others.”<sup>4</sup> (p15) If morality consists of social practices and not moral theories, then theories of morality should be attempts to understand those important social practices.

Second, Walker hypothesizes that practices characteristic of morality are practices of responsibility. She maintains that practices of responsibility “implement commonly shared understandings about who gets to do what to whom and who is supposed to do what for whom.”<sup>4</sup> (p16) These practices of responsibility define who we are and what we can do, affirm what is important and what we care about, and designate who has the authority to judge us. Therefore, moral accountability is not independent of social assignments of responsibility. Rather, moral accountability arises out of the ongoing assignment, acceptance, and deflection of responsibilities between people.

Walker’s third hypothesis holds that morality is not socially modular. Here Walker argues that moral life is indistinct from social life. People’s social positions and identities define to whom and for what they are morally accountable. Therefore, people from different social positions (e.g., social classes, cultural backgrounds, generations, etc.) will understand the moral-social world differently as a matter of course. Divergences in moral judgments about a given situation or issue can be interpreted as differences in moral identities and

positions, rather than as differences in how people apply moral theories, as the TJM would suggest.

Fourth, Walker hypothesizes that the search for a pure core of moral knowledge, or the emphasis on the construction and application of moral theories, makes vast swaths of “people’s moral lives disappear or render[s] [them] unintelligible.”<sup>4</sup> (p18) Morality pertains to actual people in real human social spaces who assign, accept, and deflect responsibilities in ongoing, real time negotiations. The search for ideal, pure moral knowledge characteristic of the TJM ignores the fact that moral-social worlds vary significantly between people. The view that moral knowledge transcends the boundaries of a social world with obvious social divisions shields moral theorists from seeing moral knowledge as culturally situated. Therefore, the pursuit of a transcendent core of moral knowledge negates significant portions of daily life.

### **Resolving the Debate: An Appeal for Consilience**

The TJM and ECM endorse vastly different views of what morality is and how moral knowledge is obtained. It would be useful in HCEC to identify which of the two models more accurately describes what people do. Attempts to resolve this debate may benefit from looking to the natural world for answers, asking what scientific research suggests seeking about how people make moral judgments. E.O. Wilson has long advocated for seeking consilience between the sciences and the humanities, which includes moral philosophy.<sup>5-7</sup> Consilience refers to “the interlocking of causal explanations across disciplines.”<sup>5</sup> Wilson demonstrates how in the natural sciences, the “webwork of established cause



and effect...is almost continuous from quantum physics to biogeography.”<sup>5</sup>

Chemistry and physics, which were once considered disparate fields, form a unified continuum explaining physical phenomena on a scale ranging from subatomic particles to the motions of the galaxies. This continuum undergirds molecular chemistry, which has strong causal links to cellular, organismic, and evolutionary biology. The webwork traverses vast scales of space, time and complexity, uniting what appear to be radically different phenomena into a single web of knowledge.

Wilson argues that the humanities are next to be linked to the causal webwork.<sup>5-7</sup> Humans are one of many biological species living on Earth, and we are not free from the causal relationships that exist in the natural world. In fact, as one particular type of organism, we fit right into the continuum as a species within organismic biology. The aspects of human nature that are traditionally addressed in the humanities are products of the human mind, which can be understood in terms of biology, neuroscience, genetics, and evolution. Although scientific and literary cultures have traditionally been considered “an epistemological discontinuity, a permanent difference in ways of knowing,”<sup>5</sup> the idea of connecting science and the humanities into one unified web of knowledge is not as farfetched traditionally thought.

Still, one may argue that drawing on descriptive research from the natural sciences of how people actually make moral judgments misses the point of moral philosophy. Critics might argue that moral philosophy is prescriptive (i.e., determines what ought to be) whereas the sciences are descriptive (i.e., explains

what was, is, or will be). Therefore, looking to the sciences to understand how people make moral judgments should not inform the philosophical debate between the ECM and the TJM, because moral philosophy and the sciences address two different questions.

However, this argument fails after considering the goal of Walker's project. Walker's project makes no attempt to determine what ought to be. Deciding whether the TJM or the ECM better describes morality *is* a descriptive question. She aims to determine what the nature, source, and justification of moral knowledge actually *is*. This is a descriptive question, and therefore certainly benefits from appealing to the sciences for answers. Moral philosophy and the sciences are integral to each other, and a scientific perspective on the human condition can only be illuminating for moral philosophy.

## Summary

The moral epistemology, or the conception of the nature, scope, and justification of moral knowledge, endorsed by HCE consultants steers the practice of HCEC. Therefore, an accurate representation of the nature of morality is critical. Margaret Urban Walker proposes two contrasting models of morality: the TJM and the ECM. The TJM views morality as a compact, codifiable, impersonally action-guiding code for an agent, and implies the existence of a timeless, universal moral reality that exists independently of human experience. Conversely, the ECM views morality as a human social phenomenon comprised of ongoing negotiations about responsibilities and accountability between people. These two models differ fundamentally, and identifying which model more

accurately describes the nature of morality would benefit HCEC. An appeal to research from outside of philosophy, integrating science and the humanities, would inform this debate over the nature of moral knowledge.

## Chapter 2

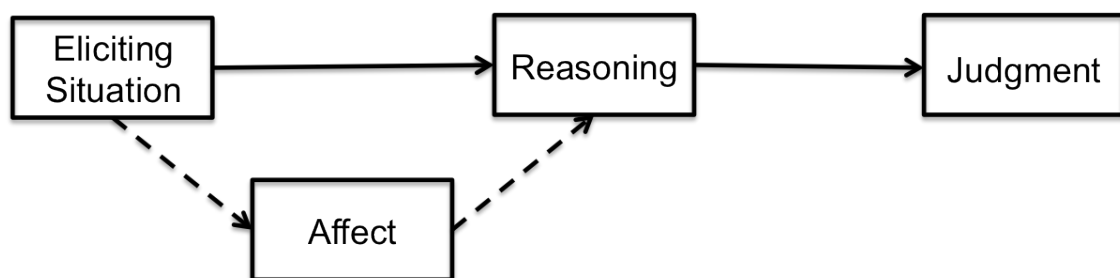
An accurate portrayal of the nature, source, and justification of moral knowledge is paramount in healthcare ethics consultation (HCEC) because it influences how consultants approach their practice. In the last chapter, I presented two contrasting views of morality based on Margaret Urban Walker's distinction between the theoretical-juridical model (TJM) and the expressive-collaborative model (ECM). The TJM describes morality as an attempt to access some timeless, universal moral truth by developing rationally codifiable laws, procedures, or principles to guide individual behavior. Conversely, the ECM describes morality as a human social phenomenon that arises out of ongoing negotiations between people over their responsibilities. Finally, I argued that evidence from the sciences might contribute to this philosophical debate.

In this chapter, I present evidence that people do not come to their initial moral judgments by applying moral theories or through impartial philosophical reflection. I then summarize several research domains that have implications for a new model of moral judgment, including affective processing, automaticity, neuroscience, evolutionary theory, cultural psychology, and primatology.

Integration across these domains suggests that an accurate model of moral judgment should 1) be a dual-process model, with one automatic unconscious process and one controlled deliberative process, and 2) explicitly recognize that moral judgment is an ongoing social process.

### **Do People Make Moral Judgments Based On Reason?**

As described in Chapter 2, the TJM views people as individual reasoners, making moral judgments through the application of general moral theories to specific cases. In moral psychology, this focus on the rational application of moral theories is consistent with what Jonathan Haidt calls a rationalist model of moral judgment (Figure 1).<sup>8</sup> According to Haidt, rationalist models of moral judgment hold that reasoning plays the primary causal role. While people certainly have emotions that can influence how people reason, these emotions do not have a direct effect on moral judgments.



*Figure 1.* Haidt's rationalist model of moral judgment.<sup>8</sup> Affect can influence reasoning, but does not directly influence moral judgments.

Haidt argues that rationalist models ascribe variation in moral judgment to differences in how people reason about moral issues. Walker makes similar conclusions regarding the TJM, stating that "moral disagreement or diversity is...rendered as [an] application of different rational procedures."<sup>4</sup> According to both the TJM and Haidt's description of rationalist models of moral judgment, moral judgments are best understood by investigating how people reason about moral issues.

However, [Haidt and other researchers argue](#) that rationalist models of moral judgment underestimate the causal influence of emotions. In fact, [Haidt argues that automatic emotional](#) intuitions come first when [individuals](#) make moral judgments, with moral reasoning occurring second in an attempt to build supporting arguments.<sup>8</sup> Examples of these lines of research include the moral dumbfounding phenomenon, evidence for [a direct](#) causal link [between](#) emotions [and](#) moral judgment, neuroimaging studies, and evidence that moral reasoning occurs post hoc.

Importantly, the research presented here does not comprehensively review the broad literature on the role of reasoning and [emotional](#) intuitions in making moral judgments. I aim only to present illustrative examples of the major criticisms against rationalist models of moral judgment.

### **Moral Dumbfounding**

The first line of research suggesting that [emotions have a direct causal link to](#) moral [judgments](#) is moral dumbfounding. Imagine the following scenario:

Julie and Mark are brother and sister. They are traveling together in France on summer vacation from college. One night they are staying alone in a cabin near the beach. They decide that it would be interesting and fun if they tried making love. At the very least it would be a new experience for each of them. Julie was already taking birth control pills, but Mark uses a condom too, just to be safe. They both enjoy making love, but they decide not to do it again. They keep that night as a special secret, which makes them feel even closer to each other. What do you think about that? Was it OK for them to make love?<sup>14</sup>

Most people who read this story immediately say it is morally wrong for these siblings to make love. [However, they also](#) have difficulty justifying why. Jonathan Haidt and colleagues demonstrated this phenomenon, which they call moral dumbfounding, by presenting participants with several tasks, including a

dispassionate moral reasoning scenario and two morally dumbfounding scenarios.<sup>14</sup> The dispassionate moral reasoning scenario involves a man who must decide whether to steal a drug in order to save his dying wife. The two morally dumbfounding scenarios include 1) the story about consensual sex between two adult siblings above, and 2) a story about cannibalism of a corpse donated for research. Participants were asked to make a moral judgment about the scenarios, and were told that the investigators would attempt to challenge their judgment. After each task, participants were asked to fill out a questionnaire rating their level of confusion, irritation, confidence in their judgment, and extent to which they based their judgment on a “gut feeling.” The series of tasks were also video-recorded, coded, and analyzed following completion.

Participants were more likely to report making their judgments based on “gut reactions” for the morally dumbfounding vignettes compared to the dispassionate moral reasoning story. Furthermore, when their arguments were challenged, participants were more likely to surrender their initial argument for morally dumbfounding stories compared to the dispassionate moral reasoning story, but were equally likely to hold on to their initial judgment. Participants were also more likely to make unsupported declarations such as, “It is just wrong!” for the incest scenario compared to the dispassionate moral task.

This study demonstrates that certain situations elicit strong emotional intuitions about what is right and wrong that cannot be supported by reason, a phenomenon known as moral dumbfounding. In morally dumbfounding situations, the majority of participants hold on to their initial judgments, even after

admitting the fallibility of their justifications. This provides evidence that deliberative reasoning does not drive moral judgments to the extent suggested by rationalist models. This also provides evidence that emotions have a direct causal influence on moral judgments.

### **Changing Moral Judgments by Manipulating Moral Emotions**

The direct causal influence of emotions on moral judgment is further supported by a series of experiments using posthypnotic suggestion to manipulate emotions.<sup>15</sup> In the first experiment, researchers suggested hypnotized participants to feel a pang of disgust when they heard a particular word, but to have no memory of that suggestion until cued to remember. Half of the participants were told to feel disgust from the word “often” and half were instructed to feel disgust from the word “take.” The participants were then removed from their hypnotic state and given six vignettes that were designed to be morally dumbfounding. The six vignettes were written in two forms to include either the word “take” or the word “often” without changing the semantics of the vignettes. For example, “the Congressman [*regularly takes/often accepts*] bribes.” After reading each vignette, participants rated how morally wrong they thought the behavior was. To ensure that the hypnosis was effective, participants were also asked if they “would like to *take* a cookie” from a tray and told that they could “*take* as many as they liked.”

As predicted, participants who were hypnotized to the “take” condition took significantly fewer cookies than those hypnotized to the “often” condition, proving that the posthypnotic suggestion was successful. Most importantly, however, the



behaviors in the vignettes were rated as more immoral when the disgust cue was present compared to when the disgust cue was absent. These findings offer experimental evidence, rather than just correlational evidence, that manipulating emotional predispositions has a direct impact on moral judgments.

However, it is possible that the lower scores would generalize to any rating scale, not just a rating scale about morality. This shortcoming was addressed in the second experiment. Participants followed the same protocol, except for several important changes. The second experiment included a new control story that contained no moral violation. For instance, “Dan is a student council representative for his school. When bringing up topics for discussion, he [*tries to take/often picks*] topics that are important to both the students and the professors.” The second experiment also included further controls, where participants rated how much they would enjoy doing 12 activities. Four of the activities contained the word “often,” four contained the word “take,” and four contained neither.

The findings for the second experiment replicated the results of the first: participants judged the moral transgressions to be significantly more immoral when the disgust cue was present compared to when the disgust cue was absent. However, the presence of the disgust cue did not significantly affect the enjoyment ratings of the 12 non-transgression-related activities. Furthermore, the responses of participants regarding the vignette that did not contain a moral transgression suggest that manipulating emotions can actually create a moral wrong from scratch. In the absence of a disgust cue, participants rated the event

as neither disgusting nor morally wrong at all. However, the presence of the disgust cue significantly increased ratings of both disgust and moral wrongness, even though there was no moral transgression whatsoever.

Qualitative reports from the participants further show that emotions play a causal role in moral judgments. One participant is quoted as saying, “When ‘often’ appeared I felt confused in my head, yet there was turmoil in my stomach. It was as if something was telling me that there was a problem with the story yet I didn’t know why.” Participants’ responses to the story without a moral transgression were particularly revealing. Participants often rationalized their responses with unjustified attacks on the fictitious character. One participant said that the character was a “popularity-seeking snob.” Another wrote, “It just seems like he is up to something.” These findings support the view that moral emotions play the primary causal role in moral judgment, not moral reasoning as rationalist models suggest.

### **The Trolley and The Footbridge: an fMRI study**

The important role of emotions in moral judgment is corroborated by neurobiological evidence. Greene et al. used functional magnetic resonance imaging (fMRI) to measure brain activity in different regions of the brain as people made moral judgments.<sup>16</sup> The researchers used two classic moral dilemmas in their research: the trolley dilemma and the footbridge dilemma.

In the trolley dilemma, a runaway trolley heads down a track that forks in two directions. A group of five people are tied down at one end of the track, while a single person is tied down at the other end. If the trolley continues on its current

track, the group of five will be run over and killed. However, you have the opportunity to pull a lever and switch the trolley to the second track, sparing the group of five but killing the single person instead. Should you pull the lever to switch the trolley, or should you let the trolley continue on its present path?

The footbridge dilemma is similar to the trolley dilemma in all respects except for one important difference. Instead of pulling a lever, you must push an innocent man off of a footbridge out in front of the trolley in order to stop it from reaching the group of five. The man is the only person large enough to stop the trolley. Should you push the man in front of the trolley, sacrificing his life in order to save the group of five?

Interestingly, while people often elect to pull a lever in order to save the group of five, few elect to push the large man off of the footbridge. Yet reason alone suggests that these dilemmas are equivalent: one life is sacrificed in order to save five. If the two outcomes are logically equivalent, what explains the differential in responses?

Greene et al. investigated this very question in a series of fMRI experiments.<sup>16</sup> The authors recognized that moral dilemmas differed from more trivial dilemmas, such as deciding whether to take the bus or drive to work. Furthermore, when comparing the footbridge and trolley dilemmas, they recognized that pushing a person in front of a trolley seemed much more personal and intimate compared to pulling a lever. Based on these observations, the authors categorized a series of dilemmas as moral-personal, moral-impersonal, or non-moral dilemmas. Moral-personal dilemmas contained intimate

moral transgressions, similar to the footbridge dilemma. Moral-impersonal dilemmas contained passive and more removed moral transgressions, similar to the trolley dilemma. Non-moral dilemmas contained transgressions that held no moral weight, such as deciding whether drive to work or take the bus.

The investigators asked participants to respond to these dilemmas and recorded their brain activity in four emotional centers and three reasoning centers of the brain. They found that moral dilemmas showed significantly more brain activity in emotional centers compared to non-moral dilemmas. Furthermore, moral-personal dilemmas showed significantly less brain activity in all three reasoning centers compared to moral-impersonal and non-moral dilemmas.

These findings offer the first neurobiological documentation of emotional involvement in making moral judgments. All moral decisions showed greater emotional involvement compared to non-moral decisions, suggesting that emotions are more intimately involved in moral judgments than normal daily decisions. Furthermore, moral judgments in intimate moral dilemmas were made using fewer reasoning processes than either impersonal moral dilemmas or non-moral decisions. This presents strong neurobiological evidence that moral judgments are not achieved through purely rational process.

### **Moral Reasoning as Strategic Reasoning**

A set of experiments by Liu and Ditto further undermines the notion that moral reasoning plays the primary causal role in moral judgments.<sup>17</sup> According to rationalist models of moral judgment, people aggregate their factual beliefs about a moral issue and then use those factual beliefs to

make their moral judgments. Moral reasoning can be likened to a judge: the evidence is gathered and weighed before a judgment is made.

However, given the research presented above, the investigators were dubious of the rationalist view. The authors hypothesized that factual beliefs used in moral reasoning are in fact more often developed post hoc to support an initial intuitive moral judgment.

In their experiments, Liu and Ditto presented participants with four real world moral problems: forceful interrogation, condom promotion, stem cell research, and capital punishment. The participants were then asked to rate the degree to which each issue is right or wrong, and to rate their perceived costs and benefits.

In all four cases, participants who judged the act to be morally wrong also believed that the act would yield fewer benefits and higher costs. For example, participants who indicated that forceful interrogation was morally acceptable also indicated 1) a higher likelihood that the interrogation would procure valuable information, and 2) that the prisoner would feel less pain when compared to participants who indicated that forceful interrogation was immoral.

This experiment demonstrates a correlation between our moral judgments and the perception of the probable outcomes. However, the causal direction of this relationship remains unanswered: do factual beliefs influence our moral judgments, or do moral judgments influence our factual beliefs?

The final experiment answers the question of causal direction. Participants were presented with the same set of four real world scenarios. Following the first battery of testing, half of the participants read a pro-capital punishment essay, and half read an anti-capital punishment essay. The essays were explicitly written to include *no factual information* about the costs or benefits of capital punishment. After reading the essay, participants re-answered the capital punishment questions from the initial test. The results showed that the perceived benefits of capital punishment significantly increased after reading the pro-capital punishment essay, and significantly decreased after reading the anti-capital punishment essay. Similarly, the perceived costs of capital punishment significantly increased after reading the anti-capital punishment essay, and significantly decreased after reading the pro-capital punishment essay.

The final experiment shows that factual beliefs are influenced by our moral judgments. Once we have reached a conclusion regarding the morality of a particular act, our perception of the facts related to that act change in order to justify that position. Moral reasoning does not utilize facts like a judge, weighing all available evidence equally. Moral reasoning instead utilizes facts like a lawyer, building a case to support our particular position.

### **Requirements of a New Model of Moral Judgment**

Given the evidence presented above, rationalist models of moral judgment give disproportionate weight to moral reasoning, and underestimate the causal

role of moral emotions. Below, I summarize several domains of research that must be addressed in a more comprehensive model of moral judgment.

Before presenting this research, it is important to note that the new model must be able to account for the years of research on moral reasoning. The argument for the integration of moral reasoning research is simple. None of the criticisms I have presented above suggest that the empirical findings in the moral reasoning literature are invalid, although they may need to be interpreted in a new light. I have only suggested that psychological models that focus on moral reasoning have overemphasized the importance of reasoning compared to emotional intuitions. The evidence presented above suggests that emotions play a direct causal role on moral judgments, not that moral reasoning plays no role in how people make moral judgments. Any comprehensive model of moral judgment must account for both moral emotions and moral reasoning.

### **Affective vs. Cognitive Processing**

Affective processing is one area of research critical to understanding how moral reasoning and moral emotions relate. Eagly and Chaiken broadly define affect as feelings or emotions that people have in relation to an object, person, place, concept, etc.<sup>18</sup> This contrasts with cognition, which they broadly define as thoughts that people have about an object, person, place, concept, etc. Affect primarily pertains to evaluative processing: assigning an emotional valence to a stimulus. In contrast, cognition primarily pertains to information processing: interpreting and organizing the features and characteristics of the stimulus.

Prior to the 1980's, affect was thought to happen only after substantial cognitive processing had occurred.<sup>19</sup> According to this view, sensory information is absorbed from the environment and processed, ultimately leading to a mental representation of the stimulus. This initial information processing determines the characteristics of the sensory information (ex. "John is nice"). Only after this mental representation is established can an affective judgment occur. This secondary affective judgment evaluates whether or not the characteristics of the mental representation are desirable (ex. "I like John").

Intuitively, it seems logical that information processing must precede affective evaluation. In order to conclude whether something is good or bad, don't we need to first establish what that thing is like? As Robert Zajonc summarizes in the introduction of his seminal paper *Feeling and Thinking: Preferences Need No Inferences*, "if we say, for example, that we like John *because* he is intelligent, rich, and compassionate, it follows that we must have gained that impression of John's intelligence, wealth and compassion...before we formed an attraction to him."<sup>19</sup>

However, Zajonc presents evidence that, in fact, affective evaluations can occur independently from cognitive processing.<sup>19</sup> He bases his assertion on a series of studies showing that people are able to make affective evaluations of stimuli without forming a mental representation. In these studies, researchers present stimuli either 1) while the participants are distracted with another task, or 2) for an incredibly short amount of time. The participants are then given a list of



stimuli and asked 1) to identify which stimuli are novel and which are familiar, and 2) to rate their preferences for each stimuli.

Across these studies, the participants were unable to accurately identify which stimuli were novel and which stimuli were familiar. This confirms that the stimulus presentation methodology successfully precluded participants from developing a mental representation. However, when the participants were asked to rate their preferences for each stimulus, they significantly preferred familiar stimuli to novel stimuli. Recall that the contemporary view at that time considered a mental representation of a stimulus to be a prerequisite for affective judgments. Yet, this evidence suggests that people are able to make affective evaluations of stimuli without forming a mental representation.

Based on these findings, Zajonc hypothesized that affect and cognition function as two separate systems, able to work relatively independently of each other. He describes how affect evolved long before cognition, and that affect played a central role in the evolutionary fitness of species across the animal kingdom. As Zajonc states:

The limbic system that controls emotional reactions was there before we evolved language and our present form of thinking. It was there before the neocortex, and it occupies a large proportion of the brain mass in lower animals. Before we evolved language and our cognitive capacities...it was the affective system alone upon which the organism relied for its adaptation.<sup>19</sup>

He then argues that it would be unlikely for such an ancient processing system that played such a critical role to survival to completely lose its autonomy to the newer evolved cognitive system. As Zajonc states:

It is rather more likely that the affective system retained its autonomy, relinquishing its exclusive control over behavior slowly and grudgingly. At

most, the formerly sovereign affective system may have accepted an alliance with the newly evolved system to carry out some adaptive functions jointly. These conjectures make a two-system view more plausible than one that relegates affect to a secondary role mediated and dominated by cognition.<sup>19</sup>

The idea that affect and cognition work independently was a radical notion at the time. Since then however, this two-system view has become widely endorsed. Dual-systems processing extends into other areas of psychological research, including research on automaticity.

### **Automatic vs. Conscious Processing**

Not only can mental processes be conceptualized as affective or cognitive, but mental processes can also be conceptualized conscious or automatic.<sup>20</sup> Conscious processes are mental processes that occur under our awareness (i.e., we know when these processes are occurring), that are intentional (i.e., we these processes purposefully), that are effortful (i.e., these processes require mental energy), and that are controllable (i.e., we can stop these processes at any time). Automatic processes are mental processes that occur effortlessly and without need for conscious guidance. Some automatic processes must be initiated by an initial act of will to start the process (ex. highway driving on “autopilot”), and others start without an initial act of will (ex. visual perception).

The amount that automatic vs. conscious processing influences our daily lives remains hotly debated. In regards to this debate, Bargh and Chartrand argue that “most of a person’s everyday life is determined not by their conscious intentions and deliberate choices but by mental processes that are put into motion by features of the environment and that operate outside of conscious

awareness and guidance.”<sup>20</sup> (p462) The empirical evidence supporting this claim draws on two classes of research: 1) priming studies showing that automatic processing influences social behavior, and 2) ego depletion studies showing that conscious regulation of behavior is exhausting and can only occur sparingly.

The first class of research supporting the dominance of automatic processing in daily life is priming studies. Priming studies involve unobtrusive manipulations in the environment that activate automatic mental processes outside the awareness of the participants, influencing subsequent participant behavior. In one experiment conducted by Bargh, participants were primed with words related either to rudeness (ex. rude, impolite, obnoxious), politeness (ex. respect, considerate, polite), or neither (control condition) in an initial language task. Meanwhile the researchers began conversing amongst themselves, providing an opportunity for participants to interrupt the conversation once they had completed the language task. Significantly more “rude” primed participants interrupted the conversation (67%) compared to the control condition (38%), whereas only 16% of “polite” primed participants interrupted the conversation. These findings suggest that automatic processes operating beneath conscious awareness have a significant impact on our daily decisions.

The notion that automatic processes heavily influence behavior is particularly salient in regards to unconscious attitudes. A meta-analysis in 2009 by Greenwald et al. found that unconscious, automatic, evaluative associations were predictive of a number of behaviors above and beyond conscious, explicit attitudes.<sup>21</sup> These behaviors included consumer and political preferences,

substance abuse, and discriminatory behaviors based on race, gender, and sexual orientation. In 2013, another meta-analysis by Oswald et al. had similar findings, although the effect sizes were smaller compared to Greenwald et al.<sup>22</sup> An additional review by Burgess et al. showed that unconscious racial biases contribute to troubling racial differences in medical care.<sup>23</sup>

The second class of research supporting Bargh's claim that automatic processes dominate our daily life is derived from ego depletion studies. Ego depletion studies involve studying the impact of an initial self-control task (ex. refraining from eating free candy) on performance in a subsequent self-control task presented as an unrelated experiment (ex. persistence on a word search task). Across these studies, self-control in the second task is significantly depleted when participants undergo the initial self-control task. Based on these findings, Bargh argues that it would be impossible to live in our complex world if the majority of our processing was deliberate, controlled, conscious decisions. As Bargh states, "to consciously and willfully regulate one's own behavior, evaluations, decisions, and emotional states requires considerable effort and is relatively slow. Moreover, it appears to require a limited resource that is quickly used up, so conscious self-regulatory acts can only occur sparingly and for a short time."<sup>20</sup> (p476) However, automatic processes are "unintended, effortless, very fast, and many of them can operate at any given time...continually in gear guiding the individual safely through the day."<sup>20</sup> (p476) The involvement of automatic processing, which appears to play a critical role in our everyday decisions, must be addressed by any comprehensive model of moral judgment.

## **Neuroscience and Acquired Sociopathy**

Neuroscientific research on general decision-making suggests that not only are emotions and reasoning present as two distinct systems, but also that both are necessary for proper functioning. In 1996, Bechara and colleagues presented evidence that damage to specific sectors of the prefrontal cortex thwarts the ability to evaluate the consequences of future behavior, despite retaining normal intellectual understanding of the consequences.<sup>24</sup> The research compares the functioning of two groups of participants: neurologic patients with damage to vmPFC and normal controls. The patients with damage to the vmPFC completed neuropsychological tests to assess intellect and memory. Both groups then participated in a card game involving rewards and punishments based on their decisions, while researchers recorded skin conductance responses (SCR's), a measure of affective activation. SCRs were measured 1) when a reward was presented, 2) when a punishment was presented, and 3) while the participants were deliberating about their decisions.

The results of this study showed that both patients and controls had affective reactions to receiving rewards and punishments. However, controls, but not patients, generated affective responses during the deliberative process. This data suggests that patients with vmPFC damage do not generate anticipatory affective responses to imagined future events. It is therefore impossible for these patients to evaluate the future consequences of a potential decision, despite understanding what those consequences would be. As Damasio writes, "patients with damage to the prefrontal region develop a severe impairment in personal

and social decision making, in spite of otherwise largely preserved intellectual abilities.”<sup>25</sup> The authors loosely term this phenomenon as “acquired sociopathy.” Based on these findings, affect clearly plays a critical role decision-making, and hyper-rational decision-making without reference to affect would actually be catastrophic.

### **Dual-process models**

The research presented above can be integrated to form the conception of dual-process models. Both Zajonc’s research on affect and Bargh’s research on automaticity present evidence that two different processes work simultaneously. Both present evidence that the first system (affective processes and automatic processes) occur quickly, automatically, and effortlessly. Both also present evidence that the second system (cognitive processes and controlled processes) occur slowly, controlled, and require mental effort. The research in neuroscience suggests that, not only are these two systems present, but also both are necessary for proper functioning.

Dual-process models maintain that two different processes work in parallel as a person makes a judgment or solves a problem.<sup>26</sup> The first process is a quick, automatic, affective process based on unconscious pattern matching and heuristics. The automatic process is older evolutionarily and is common to all mammals. The second process is slow, controlled, analytical processing that occurs consciously and requires effortful mental activity. The controlled process represents a newer evolved function unique to humans, primates, and perhaps

other close evolutionary cousins. This deliberative process is not necessarily involved in normal decision-making, but can be voluntarily recruited if desired.

Greene et al. tested a dual-process model of moral judgment by repeating their trolley and footbridge dilemma experiment outlined above, but this time while measuring the reaction times of the participants.<sup>16</sup> To refresh your memory, both dilemmas entail sacrificing the life of one person to save the lives of five people. However, the trolley dilemma entails pulling a lever and the footbridge dilemma entails pushing a man in front of the train. Greene et al. theorized that in the footbridge dilemma, our emotions would tend to compel us to *not* push the man in front of the trolley. Therefore, people who *do* select to push the man are making “emotionally incongruent” responses, requiring substantial controlled processing to override their initial affective response. Because controlled processing is slow compared to affective processing, the dual-process model predicts that it would take longer to arrive at emotionally incongruent responses. Therefore, Green et al. hypothesized that participants who made emotionally incongruent responses would take significantly longer to make their judgment compared to those who made emotionally congruent responses.

Greene et al. confirmed this hypothesis, showing that participants who made emotionally incongruent responses took significantly longer to reach their decision compared to participants with emotionally congruent responses.<sup>16</sup> This finding suggests that moral judgment does indeed follow a dual-process model, where moral judgments are made based on both primary quick, automatic, affective processing and secondary slow, deliberative, rational processing.

## **Cultural Psychology**

Cultural psychology is an interdisciplinary field intersecting anthropology, psychology, and linguistics. The aim of cultural psychology is to understand how cultural differences influence psychological diversity. According to Richard Shweder:

[The goal of cultural psychology] is to understand why so many apparently straightforward questions about human psychological functioning...have not resulted in a consensus among qualified scientists, and why so many generalizations about the psychological functioning of one particular population...have not traveled well across sociocultural, historical, and institutional fault lines.<sup>27</sup>

This central mission, the development of psychological theories that account for cultural variance without sacrificing the existence of a universal human nature, is perhaps summarized best by the discipline's slogan: "universalism without uniformity."

Unfortunately, this task is harder than it may appear. In a seminal paper by Joseph Henrich and colleagues, the authors argue that behavioral scientists routinely publish broad claims about human psychology based entirely on samples drawn from WEIRD (Western, Educated, Industrialized, Rich, and Democratic) cultures.<sup>28,29</sup> The authors attribute this to implicit assumptions by researchers that either there is little variation across human populations or that these participants are fairly representative of the human species. However, based on a broad review of results across the behavior sciences, including research on moral reasoning, reasoning style, and views of fairness and cooperation, the authors conclude that WEIRD cultures are frequent outliers. This further supports rigorous attempts to develop psychological models that



describe our universal human nature while still explaining variability between cultures.

Cultural psychology calls for psychological models to account for cultural variation in human psychology without sacrificing the notion that there are universal aspects of human nature. Or, as Shweder states, one must “reconcile human variety with our common humanity.”<sup>27</sup> Unfortunately, this can be difficult to achieve. Grounding a new psychological model of moral judgment in evolutionary theory may help avoid this pitfall.

### **Evolutionary psychology**

Evolutionary psychology attempts to explain human psychology through an evolutionary lens. Given that humans are an evolved biological species, it follows that the mental processes that humans use today must have been adaptive in our evolutionary past. Morality is a concept that is universal across cultures. People all around the world have ideas about right and wrong. Yet, the specific ideas about what is moral or immoral vary significantly across and within cultures. Combining the goals of cultural psychology (universalism without uniformity) and evolutionary psychology (human nature is evolved) allows common cultural differences in moral judgments to be conceptualized as different approaches to universal evolutionary problems. What evolutionary problem present in our daily lives might morality itself aim to address?

One potential explanation is that morality allows people to manage our complex social world. As McGlynn writes, “living in groups involves a balance of conflict and cooperation, which is mediated by the costs and benefits associated

with living socially. When the benefits of living socially exceed the costs and risks of social life, scientists predict that social cooperation will be favored.”<sup>30</sup>

Evolutionary theory describes morality as the social phenomenon whereby people balance conflict and cooperation. Morality involves individuals defending and justifying their own behavior to others in order to avoid being punished or ostracized, maximizing benefits for the individual. Morality involves people regulating the behaviors of others, establishing norms and expectations that are beneficial for the group. This tension between what is best for the individual and what is best for the group, or what Jonathan Haidt calls selfishness and groupishness, pervades across human cultures. As Haidt writes:

Individuals compete with individuals, and that competition rewards selfishness, which includes some forms of strategic cooperation (even criminals can work together to further their own interests). But at the same time, groups compete with groups, and that competition favors groups composed of true team players, those who are willing to cooperate and work for the good of the group, even when they could do better by slacking, cheating, or leaving the group. These two processes pushed human nature in different directions and gave us the strange mix of selfishness and selflessness that we know today.<sup>31</sup> (p191)

The balance between individual benefits and group benefits presents an evolutionary challenge that is universal to all humans, and morality appears to arise out of this challenge.

### **Primateology**

Primateology provides further evidence that morality arises out of the evolutionary challenge of regulating social behavior. Frans de Waal is a primatologist interested in social behavior of apes, our closest evolutionary cousins. In his book *Good Natured*, de Waal presents evidence that apes possess most, if not all, of the ‘building blocks’ of human morality.<sup>32</sup> These

'building blocks' were largely emotional capacities pertaining to social life. Examples include the emotions that bind individuals into friendships, cohere groups into cooperative alliances, and empathy and concern for others, even if they are not direct kin. Furthermore, the social structures and hierarchies that dominate the social life of apes persist in human life today. There is no reason to suspect that we have somehow lost the social-emotional capacities that our closest evolutionary cousins exhibit regularly.

The social brain hypothesis further supports the notion that morality is concerned with regulating social life.<sup>33</sup> The social brain hypothesis attempts to explain why primates have significantly larger brains relative to body size than all other animals. The hypothesis claims that primates require relatively larger brains because of the incredibly complex, computationally demanding social worlds in which they live. As Gowlett et al. describe, "the need to keep track of the dynamically changing world of alliances and friendships that typify primate society imposes demands on the animals that are simply not matched in the less socially intense societies of other birds and mammals."<sup>33</sup>

Indeed, more recent analysis supports the validity of the social brain hypothesis. Primates are the only order of animal species to have a quantitative relationship between social group size and relative brain size. The size of the primate social group, and therefore the degree of social complexity, increases in lockstep with relative brain size.<sup>33</sup> This relationship is even stronger with respect to frontal lobe volume, the region of the brain that is the most recently enlarged among primates. Furthermore, not only does the group-size-to-brain-size

relationship exist when comparing individuals *between* species, the relationship also exists when comparing primates *within the same species*. Individuals who are a part of larger social groups and who possess greater social competencies tend to have larger frontal lobes. Interestingly, modern humans are the species with the largest social groups and the largest neocortex ratio of all primates, suggesting that indeed much of our most recent cognitive advancements pertain to dealing with social life.

## Summary

In this chapter, I presented evidence that rationalist models of moral judgment overestimate the causal role of moral reasoning and underestimate the causal role of moral emotions when people make moral judgments. I then summarize several domains of research that have implications for a new model of moral judgment. These domains include affective processing, automaticity, neuroscience, evolutionary theory, cultural psychology, and primatology. Integration across these domains draws two major conclusions about a new model of moral judgment. First, the new model should be a dual-process model, including a fast, automatic, intuitive process and a slow, deliberative, reasoning process. Second, the new model should explicitly recognize that morality is a social phenomenon that arose from the evolutionary challenge of managing social life. In the next chapter, I summarize a psychological model of moral judgment that addresses these needs and elaborate on the implications of the model for understanding the nature, source, and justification of moral knowledge.

### Chapter 3

In the previous chapter, I presented evidence that rationalist models of moral judgment overestimate the causal role of reasoning and underestimate the causal role of emotions when making moral judgments. I then summarized several domains of research that should be addressed by a comprehensive model of moral judgment. These domains included affective processing, automaticity, neuroscience, evolutionary theory, cultural psychology, and primatology. Two rough conclusions were drawn from this research. First, a comprehensive model of moral judgment should be a dual-process model, including 1) a fast, automatic, intuitive process and 2) a slow, deliberative, rational process. Second, models of moral judgment should explicitly recognize that morality is an ancient social phenomenon arising from the evolutionary challenge of managing social life.

In this chapter, I present one model that I believe meets these two requirements: Jonathan Haidt's social intuitionist model (SIM) of moral judgment. After describing the model and discussing several criticisms and limitations, I return to the philosophical debate about the nature, source, and justification of moral knowledge presented in Chapter 2. I argue that the SIM is more consistent with Margaret Urban Walker's expressive-collaborative model (ECM) of morality than the traditional theoretical-judicial model (TJM).

#### **The Social Intuitionist Model of Moral Judgment**

In 2001, Jonathan Haidt proposed the social intuitionist model (SIM): a psychological model of moral judgment that integrates the research findings

summarized [in Chapter 2](#).<sup>8</sup> The model is a dual-process model, and is social in nature. The central claim of the SIM is that an individual's initial moral judgments are caused by moral intuitions followed by post hoc moral reasoning. [Haidt defines moral judgments as "evaluations \(good vs. bad\) of the actions or character of a person that are made in respect to a set of virtues held to be obligatory by a culture or subculture."](#)<sup>8 (p817)</sup> Moral intuitions refer to ["the sudden appearance in consciousness of a moral judgment, including an affective valence \(good-bad, like-dislike\), without any conscious awareness of having gone through steps of searching, weighing evidence, or inferring a conclusion."](#)<sup>8 (p818)</sup> Conversely, moral reasoning refers to ["conscious mental activity that consists of transforming given information about people in order to reach a moral judgment."](#)

<sup>8 (p818)</sup> The SIM holds that people are more likely to use moral reasoning to justify their initial positions and persuade others to endorse their views, rather than to weigh arguments and evidence impartially.

The model consists of 6 six links that form a moral network (Figure 2): 1) the intuitive judgment link, 2) the post hoc reasoning link, 3) the reasoned persuasion link, 4) the social persuasion link, 5) the reasoned judgment link, and 6) the private reflection link. The first four links represent the primary processes in moral judgment, and are summarized below:

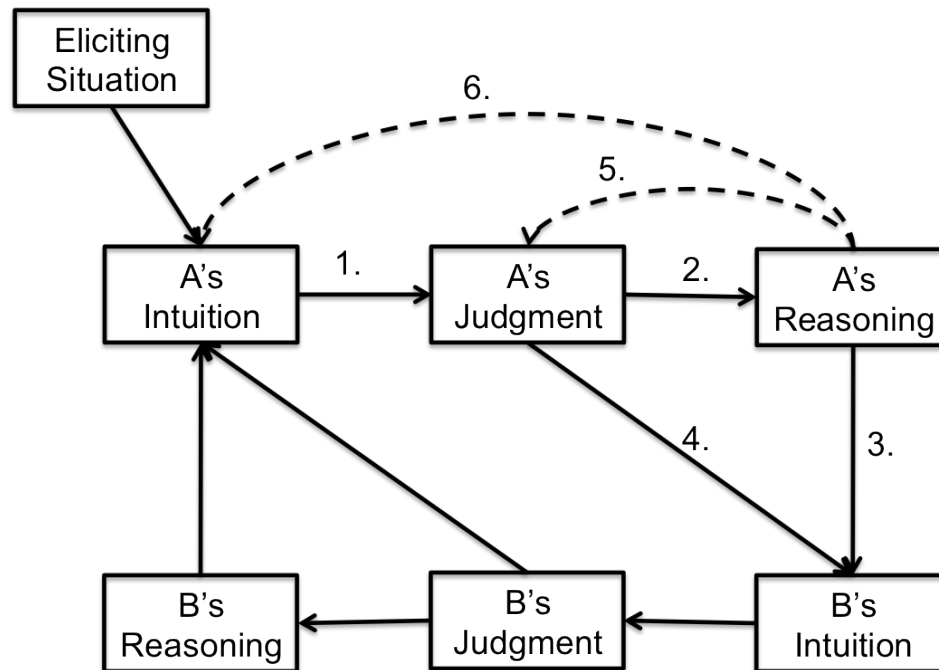


Figure 2. Haidt's social intuitionist model of moral judgment.<sup>8</sup> The numbered links are 1) the intuitive judgment link, 2) the post hoc reasoning link, 3) the reasoned persuasion link, 4) the social persuasion link, 5) the reasoned judgment link, and 6) the private reflection link. Links 5 and 6 occur less frequently and only under certain conditions.

1) *The intuitive judgment link*: The first link is the intuitive judgment link.

This link represents the appearance of an initial moral judgment based on automatic, effortless intuitions. **An** eliciting situation triggers a moral intuition (gut reaction) with a positive or negative affective valence. This moral intuition forms the initial moral judgment that the individual holds. This judgment is established quickly, automatically, and without conscious deliberation.

2) *The post hoc reasoning link*: The second link is the post hoc reasoning link. This link represents the conscious, deliberate development of arguments through moral reasoning in support of the previously established moral judgment. This link integrates the bulk of the existing research on moral reasoning. **Moral** arguments vary in their complexity and sophistication, ranging from solely

considering personal gain to principled ethical appeals. Furthermore, people vary in the types of arguments that they use, and can learn to increase the sophistication of their arguments. However, the SIM interprets the causal direction of moral reasoning differently. The SIM holds that moral reasoning does not *directly* drive moral judgments. Rather, moral arguments are more often developed post hoc in defense of previously established positions. People are more likely to reason about moral issues like lawyers defending a case, not scientists weighing the evidence.

3) *The reasoned persuasion link*: The third link is the reasoned persuasion link. This link represents the verbalization and explanation of post hoc arguments to others with the goal of justifying one's initial moral judgment or to persuade others to agree. The arguments developed through moral reasoning are expressed to other people through this link. The specific goals of reasoned persuasion vary, but include recruiting support from others, vindicating oneself for previous behavior, or defending the actions of a friend or loved one. The general goal of reasoned persuasion, however, remains constant: persuade others to adopt or accept compatible moral views.

4) *The social persuasion link*: The fourth link is the social persuasion link. This link represents the direct effect that one's moral judgments have on the moral intuitions of others, independently of whether or not reasoned persuasion is used. For instance, the mere fact that a respected individual (ex. spouse, parents, clergy, friend, etc.) opposes capital punishment might negatively



influence one's own moral intuitions (and therefore moral judgments) about the issue.

The last two links are hypothesized to occur, but only rarely and in particular circumstances. These links are described below:

5) *The reasoned judgment link*: The fifth link is the reasoned judgment link. This link represents a moral judgment that is achieved through sheer force of logic. Through this link, moral reasoning can be the causal force behind a moral judgment. However, the model hypothesizes this to be rare. This link likely only occurs when moral intuitions are weak and processing capacity is high, such as during “armchair ethics” where the reasoner is emotionally distant from the moral issue.

6) *The private reflection link*: The sixth link is the private reflection link. This represents when private reflection trips new moral intuitions that in turn influence moral judgments. The inner dialogue of private reflection allows people to take different perspectives or consider new aspects of the issue. Taking new perspectives or considering new aspects of the moral issue might trip new moral intuitions, thus altering their moral judgments.

The SIM provides a framework for discussing how people actually make moral judgments. Haidt writes that “if the [SIM] is correct as a description of human moral judgment, it may be possible to use the model to get reasoning and intuition working more effectively together in real moral judgments.”<sup>8</sup> For example, promoting the interpersonal links in the SIM allows for biases in our individual strategic reasoning to be exposed. As Haidt argues:

By seeking out discourse partners...people can help trigger a variety of conflicting intuitions in each other. If more conflicting intuitions are triggered, the final judgment is likely to be more nuanced and ultimately more reasonable.<sup>8</sup>

Another approach would be to teach moral reasoning skills. While the SIM suggests that this approach may be less effective, it would promote the use of reasoned judgment and private reflection (Links 5 and 6). A final approach, which the SIM suggests would likely be more effective, would be to create environments and cultures that foster moral discussion through reasoned persuasion (Link 3) and private reflection (Link 6).

### Limitations and Criticisms of the SIM

Several researchers have levied criticisms of the SIM since its inception.

<sup>34-36</sup> For example, Saltzstein and Kasachkoff question Haidt's reasons for rejecting traditional views of the role of reasoning in making moral judgments. <sup>34</sup> First, they argue that the SIM is not truly a dual-process model. <sup>34</sup> The authors argue that according to the SIM, "automatic processing appears to be sovereign in the making of moral judgments, with reasoning relegated to a secondary role that is only artificially called forth...Rather than assign moral reasoning a dual role in moral cognition, [Haidt] appears to relegate it to the status of an epiphenomenon." <sup>34</sup> Second, Saltzstein and Kasachkoff doubt Haidt's claim regarding the role of moral reasoning, which they describe as the view that "reasoning plays no substantive role in decision making but is employed merely as a post hoc justification of decisions that are adopted independently of the reasons subsequently offered." <sup>34</sup>

Pizarro and Bloom advance a similar criticism of the SIM.<sup>35</sup> They argue that there are additional ways that reasoning can influence moral judgments beyond what Haidt proposes in the SIM. They present two examples: 1) the influence of prior cognitive appraisals (the same situation can elicit different moral intuitions depending on the individual's previous thoughts) and 2) conscious control over the situation (people can choose which situations they expose themselves to, and which aspects of a particular situation they attend to). They argue that these processes challenge "Haidt's general conclusions about the irrelevance of deliberative reasoning, as they raise the possibility that deliberative reasoning can affect judgment, albeit in an indirect fashion."<sup>35</sup> (p195)

However, these three criticisms seem to misunderstand the conclusions that Haidt puts forward with the SIM. Namely, these criticisms overstate the extent to which Haidt minimizes the role of deliberative reasoning. Four of the six links in the model pertain to moral reasoning, and two of those links are deliberative (Links 5 and 6). While Links 5 and 6, the reasoned judgment link and private reflection link, are hypothesized to be rare, these links do allow moral reasoning to indirectly influence moral judgments. Furthermore, Link 3, the reasoned persuasion link, says that people's moral reasoning can have causal effects on the intuitions of others. As Haidt writes in his original article:

Moral judgment is not just a single act that occurs in a single person's mind but is an ongoing process, often spread out over time and over multiple people. Reasons and arguments can circulate and affect people, even if individuals rarely engage in private moral reasoning for themselves.<sup>8</sup>

The SIM does not relegate moral reasoning as an epiphenomenon or endorse the view that deliberative reasoning is irrelevant. Moral reasoning does have

causal effects on moral judgments, just not the direct causal role that has been traditionally endorsed.

Another criticism levied by Saltzstein and Kasachkoff pertains to Haidt's claims about people's motivations when they use moral reasoning. Cordelia Fine raises similar concerns in her critique of the SIM, and I believe articulates the argument more eloquently. <sup>36</sup> Fine notes how the SIM implies that reasoning is so biased toward supporting or justifying one's initial conclusion that it is unlikely to play a questioning role in our moral judgments. Haidt bases this claim on evidence from two forms of motivated reasoning: *impression motivation* (the desire to create a good impression to others), and *defense motivation* (the desire to hold attitudes and beliefs that are consistent with one's self concept). Both of these forms of motivated reasoning are prone to the biased search for evidence. However, Fine argues that Haidt ignores a third form of motivated reasoning: *accuracy motivation* (the desire to hold objectively true beliefs and attitudes). As Fine argues, "where the individual is motivated to form accurate judgments, and has the attentional resources available to do so, automatic intuitions can be overridden." <sup>36</sup>

While Haidt indeed does not explicitly address the influence of accuracy motivation on reasoning, it can be inferred how accuracy motivation could be integrated into the SIM. Increased motivation to be accurate along with available attentional resources would be increase the likelihood that an individual would use Links 5 and 6, the reasoned judgment link and private reflection link. The question of how often people use each of the three forms of motivated reasoning

is an interesting one. Perhaps more interesting, however, would be to identify which factors attenuate impression motivated and defensive motivated reasoning and promote accuracy motivated reasoning. These factors could be used to set up environments that promote more deliberative moral judgments, and attenuate the biased search for evidence.

As two further limitations of the SIM, Fine points out two interesting phenomena that the SIM does not address.<sup>36</sup> She presents compelling evidence that moral intuitions can be interrupted and moderated by conscious deliberative processing, albeit only in certain situations (where motivation to be accurate is high and cognitive resources are available). She also provides evidence from research on automaticity suggesting that conscious deliberative processes (such as Links 5 and 6 in the SIM) can be “automatized” over time after repeated intentional use. This suggests that, with practice, people can learn to use Links 5 and 6 automatically. While these represent two legitimate limitations to the SIM, they do not undermine its validity outright. Future attempts to modify the SIM should take these limitations into account.

One final debate surrounding the SIM pertains to how moral intuitions are formed. In a newer related theory, Jonathan Haidt and colleagues propose that moral intuitions are evolved predispositions that have arisen in response to evolutionary pressures related to social life.<sup>31,37-39</sup> These intuitions then develop throughout one’s life span through the weakening of some intuitions and strengthening of other intuitions based on the interaction between genes, culture, and the environment. These claims are contentious, and there are legitimate

criticisms of Haidt's view that moral intuitions are based on evolved predispositions.<sup>37-40</sup> For example, one alternative explanation of moral intuitions would be that they are learned through socialization and become intuitive over time, similar to how riding a bike becomes “automatic” with practice.

Both general accounts of how moral intuitions are formed are plausible, and they are both likely to be true to some extent. Importantly, however, this debate over how moral intuitions are formed does not undermine the validity of the SIM. The central claim of the SIM is that an individual's initial moral judgments are caused by moral intuitions followed by post hoc moral reasoning. The claim that an individual's initial moral judgments are caused by moral intuitions stands independently of how those intuitions originate and how they change over time.

### **The SIM and Moral Epistemology**

Now that the SIM and the research that supports it have been presented, it is worth circling back to the debate between the two competing philosophical views of morality: the TJM and the ECM. To review, the TJM assumes the existence of timeless moral truths that exists independently from human experience. Moral theories approximate these moral truths into codifiable laws, procedures, or principles. Individuals then use reason to apply these theories to specific cases, producing a moral judgment to guide their behavior. Diversity in moral judgments, therefore, comes from differences in how people use moral theories and reason about the specific case.

Conversely, the ECM assumes that morality is a human social phenomenon comprised of ongoing, real-time negotiations about responsibilities and accountability between people. Moral theories attempt to 1) understand the social practices that define to whom we are accountable and for what we are accountable, and 2) determine whether some social practices may be better than others. Morality does not transcend culture, because people's actual social positions and identities are what define accountability and responsibility. Divergences in moral judgments therefore can be understood as differences in moral identities and positions, rather than differences in how people apply moral theories.

The SIM and its supporting research suggest that the ECM represents the nature of morality more accurately than the TJM in two main important ways. First, the TJM falsely maintains that moral judgments are made primarily through the application of moral theories. The SIM holds that people more often make moral judgments based on fast, effortless, automatic moral intuitions, and then use strategic reasoning to search for evidence and build arguments that support their initial judgment. Moral dumbfounding occurs in situations where people have strong moral intuitions, but have difficulty developing a rational justification for those intuitions. Furthermore, people's moral judgments change as their emotional intuitions change, along with their beliefs about pertinent factual information. The concept that moral reasoning does not play the primary causal role in moral judgments is consistent with research trends in affective evaluation, automaticity, dual-process models, and neuroscience.

Second, the ECM correctly maintains that morality is a social phenomenon involving ongoing negotiations about what is right and wrong. The SIM maintains that moral judgments are not single acts that occur in one person's mind. Rather, moral judgment is an ongoing process spread out over time and over multiple people, as they attempt to justify their positions and persuade each other to agree about what is right and wrong. Importantly, neither the SIM nor the ECM renders moral reasoning obsolete. Although moral reasoning does not play the primary causal role in how individuals make moral judgments, moral reasoning does play a primary role in how people negotiate, justify, and persuade. Research in evolutionary psychology and primatology suggest that morality arises in response to the evolutionary challenges of social life, which creates a tension between what is beneficial to the individual and what is beneficial to the group. Research in cultural psychology suggests that moral diversity arises from unique approaches to deal with these common challenges.

Taken together, morality appears to be most consistent with the ECM. The research suggesting that moral reasoning does not play the primary causal role in individual moral judgments undermines the notion that rationally applying moral theories to specific cases taps into a timeless moral reality, which is a central claim of the TJM. Furthermore, the research suggesting that morality is embedded in social life involving ongoing negotiation between people is consistent with the primary tenants of the ECM. Morality does not represent some abstract, timeless ideal that exists independently of human experience. Instead, morality is a human social phenomenon that arises out of social life as



people justify their views and attempt to persuade others to agree about what ought to be done.

## Summary

A comprehensive psychological model of moral judgment should 1) be a dual-process model, and 2) emphasize the social aspects of morality. The SIM meets these two requirements. The first major claim of the SIM is that an individual's initial moral judgments are more likely to be caused by moral intuitions followed by post hoc moral reasoning. The second major claim is that moral judgment is an ongoing social process. People form moral networks, where they express their judgments and use their moral reasoning to attempt to justify their positions and persuade others to endorse their views through multiple iterations.

Returning to Margaret Urban Walker's work on the nature, source, and justification of moral knowledge, the SIM suggests that the ECM more accurately describes the nature of morality than the TJM. The fact that an individual's moral judgments are not likely to be made by rationally applying moral theories to specific cases undermines a central tenant of the TJM. Furthermore, the ECM recognizes that morality is an ongoing social phenomenon arising out of the challenges inherent to social life. The next chapter applies the SIM to the healthcare ethics consultation (HCEC) setting, better defining the best approach to HCEC as well as the role of the consultant.

## Chapter 4

To this point, I have argued that the accurate portrayal of the nature, source, and justification of moral knowledge is paramount in healthcare ethics consultation (HCEC). I presented two contrasting views of morality based on Margaret Urban Walker's distinction between the theoretical-juridical model (TJM) and the expressive-collaborative model (ECM). I argued that evidence from fields outside of philosophy might contribute to this philosophical debate, as well as improve consilience between the sciences and the humanities.

Next, I presented evidence that moral judgments are more likely to be driven by moral intuitions about what is right or wrong, with moral reasoning occurring post hoc in an attempt to justify the initial judgment. Furthermore, I presented evidence that morality is a natural phenomenon that is seen in rudimentary forms throughout the animal kingdom, and arises in response to the evolutionary challenges of social life. I also overviewed the social intuitionist model (SIM), which supports a view of morality similar to the ECM, rather than the prevailing view of morality characterized by the TJM.

In this chapter, I discuss how the SIM influences our understanding of HCEC. I describe several approaches to HCEC, and then apply the SIM to each approach in order to understand their implications for HCEC. Finally, I suggest that HCE expertise may manifest itself as nuanced moral intuitions, able to detect subtle gradations between cases that may otherwise go unnoticed. These intuitions likely develop over time, through extensive clinical experience with morally challenging cases.

## Healthcare Ethics Consultation: Which Approach is Best?

The majority of hospitals in the United States offer healthcare ethics consultation (HCEC) services to help resolve ethical questions or concerns that arise in clinical settings. HCEC is defined as “a set of services provided by an individual or group in response to questions from...involved parties who seek to resolve uncertainty or conflict regarding value-laden concerns that emerge in health care.”<sup>1,2</sup> The general goal of HCEC is to improve healthcare quality by identifying, analyzing, and resolving ethical questions or concerns.

Recently, the American Society for Bioethics and Humanities (ASBH) published the second edition of its report *Core Competencies for Healthcare Ethics Consultation*.<sup>1</sup> The basis of the report rests on the assertion that HCEC done well by competent consultants benefits the involved parties, and HCEC done poorly by unqualified consultants either fails to benefit or harms the involved parties. In the report, the authors consider several approaches to HCEC.

Most approaches to HCEC fall somewhere between two extremes: the authoritarian approach and the pure consensus approach. The defining characteristic of the *authoritarian approach* is its emphasis on consultants as authoritative moral decision makers.<sup>2,3</sup> In the authoritarian approach, consultants begin by gathering all the relevant information about the case, including the factual, conceptual, and normative issues. Consultants then apply their understanding of bioethical theory, laws, and policies to the case and present a final moral judgment. Consultants shoulder responsibility for moral judgments

based on their understanding of relevant bioethical, medical, and scholarly literature, as well as pertinent laws, institutional policies, and current practice standards.

Conversely, the aim of the *pure consensus approach* is solely to develop consensus among the involved parties.<sup>2,3</sup> In the pure consensus approach, consultants only mediate a discussion about the conflict, trying to develop a course of action that the involved parties all agree to. In contrast to the authoritarian approach, the consultant does not consider how the consensus decision relates to bioethical theory, laws, policies, or practice standards. The consultant solely seeks consensus, whatever the resolution may be.

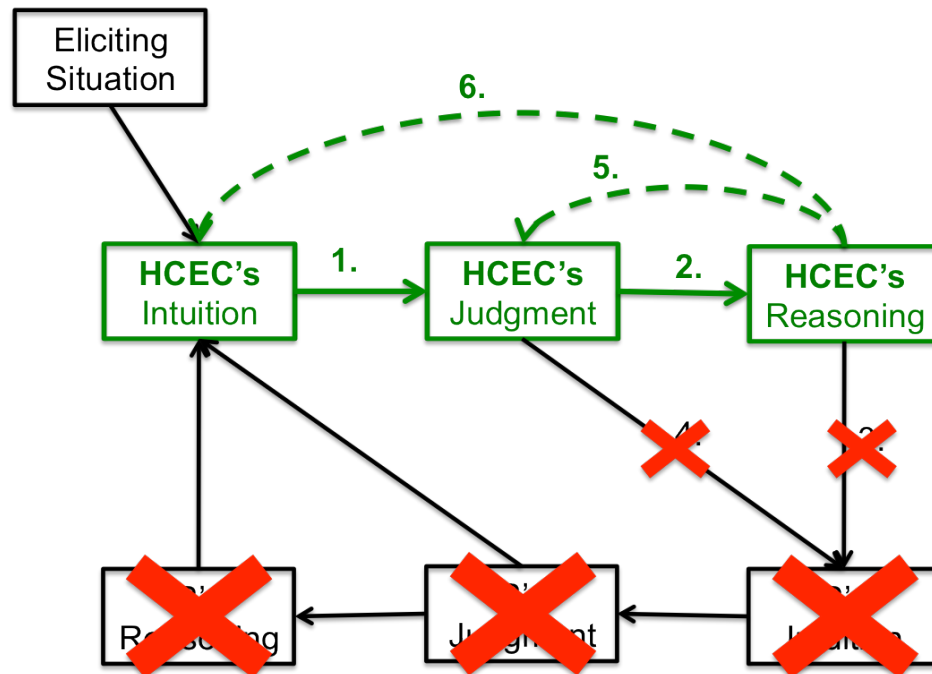
The task force recommends an approach that falls somewhere between these two extremes, which they call the *ethics facilitation approach*.<sup>1-3</sup> The ethics facilitation approach aims to complete two core tasks: (1) to identify and analyze the nature of the value uncertainty; and (2) to facilitate the building of a “principled ethical resolution.”<sup>2,4</sup> Unlike the authoritarian approach, ethics facilitation emphasizes an inclusive consensus-building process. Consultants are not considered superior moral decision makers, and the responsibility for the final moral judgment is shared between the involved parties. However, unlike the pure consensus approach, ethics facilitation maintains that there are moral boundaries within which the final decision must fall. Consultants help to ensure that the consensus decision does not fall outside of these moral boundaries.

The discussion of which approach is most appropriate for HCEC can benefit from [the SIM](#). A decision about which approach to adopt should be made with reference to our understanding of how moral judgments are actually made. The SIM is a model of this very process; it describes how people make moral judgments. How, then, does each of the three approaches to HCEC relate to the SIM?

## **The Social Intuitionist Model and Healthcare Ethics Consultation**

### **The Authoritarian Approach**

The SIM challenges the appropriateness of the authoritarian approach, because the authoritarian approach is prone to [a biased search for evidence](#) (Figure 3). In the authoritarian approach, the consultant first gathers information about the situation, which elicits an initial intuition. This intuition leads to an initial judgment about what is right or wrong. The consultant then develops justifications to support their judgment using moral reasoning. While it is possible for the consultant to undergo this iterative process several times via Links 5 and 6, these links are [less likely to be used](#).



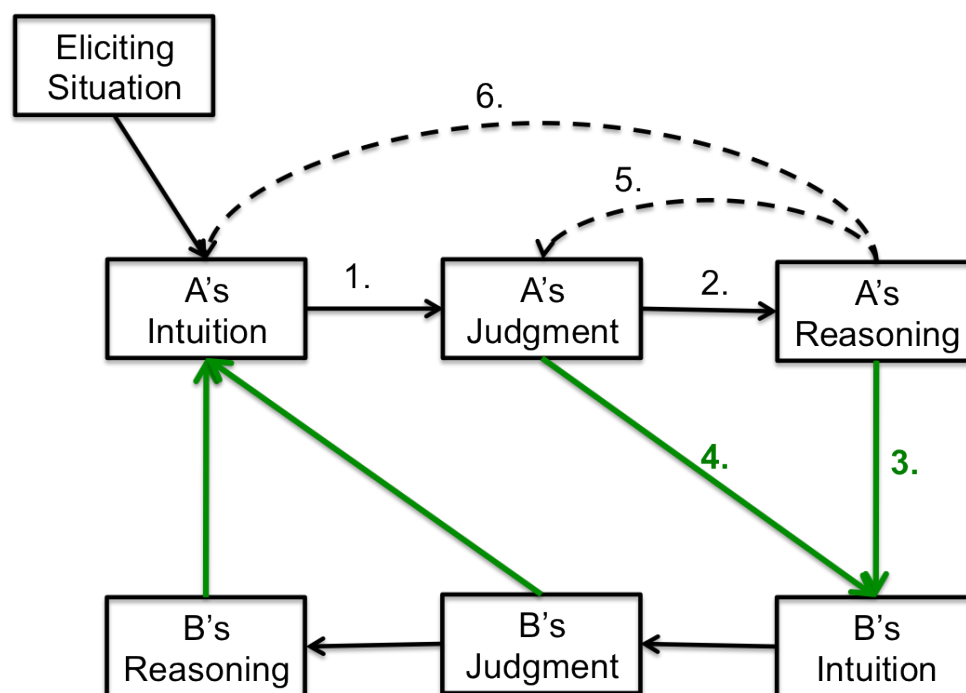
*Figure 3.* The authoritarian approach to HCEC. The consultant makes a moral judgment based on his or her own intuitions, and then reasons to find supporting arguments. The consultant can use links 5 and 6, but this is unlikely because their judgments likely go unquestioned. The interpersonal links in the model are ignored.

Consultants do not access some timeless, universal moral truth through their ability to reason and use moral theories, as the TJM would suggest. When making individual moral judgments, consultants, just like everybody else, are likely to reason to support their own moral intuitions. Although people's intuitions and judgments can change through self-reflection (Links 5 and 6), these links are thought to be less likely to be used. Therefore, removing the consultant from a social setting where their views can be challenged removes a safeguard against biased reasoning. HCEC approaches that allow a consultant to make conclusive moral judgments as an individual and do not place the consultant in a social setting where their initial judgments can be challenged (e.g., the authoritarian

approach) increases the risk of biased moral judgments, and therefore should be rejected.

### The Pure Consensus Approach

The SIM suggests that the pure consensus approach helps attenuate biased search for evidence because the approach appreciates the fact that morality is a social phenomenon (Figure 4). In the pure consensus approach, the consultant mediates a discussion between the involved parties about what ought to be done. The consultant facilitates discussion by representing the views of the involved parties to others, enabling the involved parties to communicate effectively, and attending to any communication barriers that might exist. In this way, the consultant catalyzes the links in the SIM. The consultant's main task is facilitating interpersonal communication through Links 3 and 4.



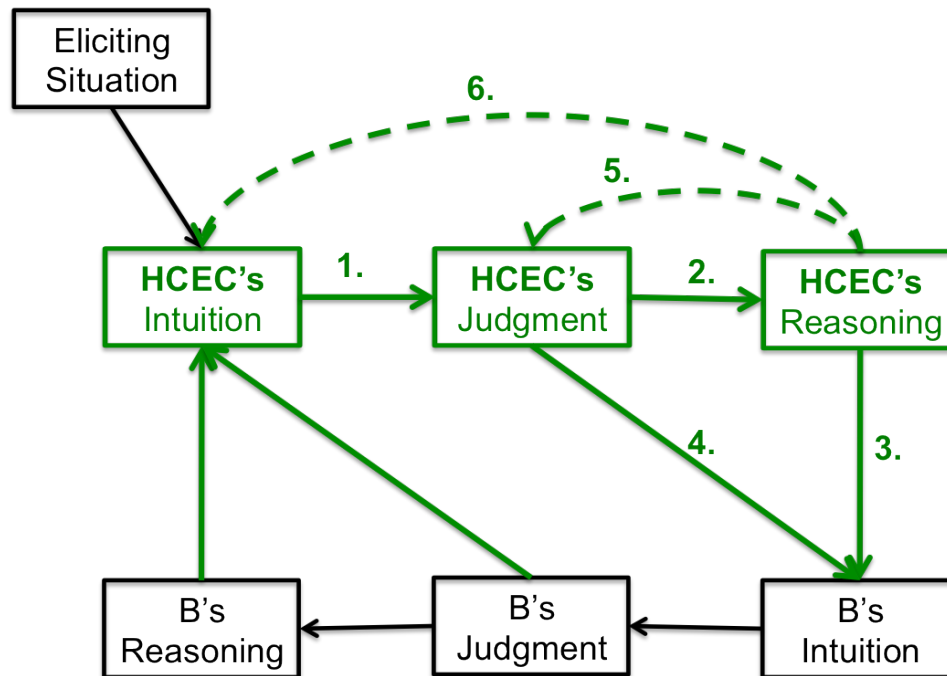
*Figure 4.* The pure consensus approach to HCEC. The consultant facilitates the interpersonal links 3 and 4, but does not contribute their own moral intuitions, judgments, and reasoning to the discussion.

Importantly, however, the pure consensus approach does not place the consultants themselves within the moral network. The consultant only catalyzes links within the network; he or she does not contribute their own intuitions, judgments or reasoning to the discussion. The fact that the consultant does not contribute his or her own intuitions, judgments, and reasoning to the discussion is what differentiates the pure consensus approach from the ethics facilitation approach, and will be discussed below.

### **The Ethics Facilitation Approach**

The ethics facilitation approach also appreciates the fact that morality is a social phenomenon (Figure 5). Similar to the pure consensus approach, the consultant mediates the discussion by facilitating the interpersonal links in the SIM. However, unlike the pure consensus approach, the consultant is also included within the moral network. Consultants contribute their own intuitions, judgments and reasoning to the discussion.





*Figure 5.* The ethics facilitation approach to HCEC. The consultant not only facilitates the interpersonal links 3 and 4, but contributes their own moral intuitions, judgments, and reasoning to the discussion as well.

The ASBH task force justifies including the consultant within the moral network based on the assumption that consultants possess HCEC expertise. The task force rejects the view that HCE consultants only have general knowledge and skills. Rather, the task force maintains that HCE consultants have specific HCEC expertise in the form of “specialized HCEC knowledge and skills competencies.”<sup>2</sup> Because consultants possess HCEC expertise, it is “appropriate for ethics consultants to share recommendations and expert opinions.”<sup>2</sup> It is therefore crucial to examine the sort of expertise HCEC may have.

### Healthcare Ethics Consultants and Expertise

In response to the revised *Core Competencies for Healthcare Ethics Consultation*, David Michael Adams has raised concern about the nature of HCEC expertise.<sup>6</sup> Adams addresses the counterintuitive claim that consultants possess ethics expertise allowing them to offer expert opinions, while still maintaining that they do not have moral authority. He writes:

To insist that [consultants] possess ethics expertise and expert moral knowledge but *not* moral authority is on the face of it a puzzling claim, since the judgments of experts typically carry with them at least some kind of authority – otherwise there would be no reason for anyone to consult them.<sup>6(p27)</sup>

He goes on to point out that being an authority is an epistemic claim, reflecting recognition of an individual's specialized knowledge and mastery of some domain. It is this possession of specialized knowledge and mastery that gives us reason to consult the expert on issues within their specialty. For example, it is because of a car mechanic's knowledge about cars that he can speak with authority about what engine parts need replacing. Furthermore, it is because of a car mechanic's knowledge we even ask him his opinion. What sorts of expertise do HCE consultants possess that justify asking them to opine on a case?

Adams argues that the interpersonal facilitation skills characteristic of the pure consensus approach are a form of expertise.<sup>6</sup> He notes that mediating discussion requires the ability to communicate clearly, listen empathetically, isolate points of disagreement, and guide a respectful, open conversation about sensitive issues. He maintains that such process and interpersonal proficiencies "comprise an unquestionably important skill set, command of which can properly be called an expertise, conferring authority on the person who has mastered them."<sup>6(p27)</sup>

However, Adams argues that the expertise in interpersonal facilitation does not justify allowing consultants to give recommendations or expert opinions. He argues that these interpersonal skills have “no necessary connection with ethics, being applicable to a broad domain of contexts having nothing to do with conflicts over values or uncertainty about goals of medical treatment.”<sup>6(p27)</sup> These skills do not give consultants authority to give recommendations or opinions on cases because these skills “do not call upon moral knowledge.”<sup>6(p27)</sup> Therefore, Adams calls for careful consideration about “the forms ethics expertise and moral authority can take.”<sup>6(p27)</sup>

Based on Adams’ argument, the process and interpersonal skills held by HCE consultants are a form of expertise. Therefore, HCE consultants have authority at least in the structuring and facilitation of a discussion. Both the pure consensus approach and ethics facilitation approach give consultants authority in that regard. The question remains, however, of whether or not the consultant should offer recommendations or expert opinions. Does HCEC expertise extend beyond facilitating discussion? Should consultants be included in the moral network?

At this point, I doubt that it can be said with certainty that competent HCE consultants possess skills extending *beyond* facilitating discussion. However, the SIM does provide a framework for hypothesizing why a HCE consultant’s opinion may be worth considering. Most critics of HCEC expertise offer the following argument:<sup>7</sup>

1. HCEC's legitimacy depends on its ability to offer expertise in moral matters
  2. Expertise in moral matters is knowledge of a singular moral truth
  3. The claim that a consultant can offer knowledge of a singular moral truth based on professional training is absurd, false, or gravely immoral
- Therefore,
4. The field is illegitimate

This criticism makes critical assumptions about the nature of morality. It parallels the TJM, holding that morality is a kind of formal knowledge that approximates a timeless moral reality. What is right or good can be determined by the application of general rational decision-making procedures in the form of moral theories. Expertise, therefore, comes from superior reasoning about and application of moral theories.

However, the SIM suggests that moral reasoning plays less of a primary role in making moral judgments than suggested by the TJM. Initial moral judgments are driven by moral intuitions about what is right or wrong, and moral reasoning is more likely to be used to develop arguments to support that moral judgment. Therefore, the notion that HCE consultant's gain expertise from their superior knowledge of moral theories is false; moral reasoning is not the primary determinant of moral judgments, or at least not to the extent suggested by the TJM.

Nonetheless, HCE consultants may still have moral expertise; we just shouldn't expect to find it in their ability to apply moral theories. The SIM

suggests that moral judgments are primarily driven by *intuitions* about what is right or wrong. Therefore, we should be discussing moral expertise in terms of moral intuitions, rather than moral reasoning.

I doubt completely that HCE consultants are able to intuit the “better” course of action based on their moral intuitions or that their intuitions should be favored over those of others. However, it may be the case that HCE consultants have developed other skills related to moral intuitions; they may have a superior ability to “feel” what each party feels, or to sense nuanced differences between cases that others might not recognize. Through extensive clinical experience with morally challenging cases that are similar in some ways and different in others, may develop moral intuitions that pick up on subtle differences and gradations between cases.

Just as an experienced physician or nurse may have a nuanced sense about a patient's prognosis based on their training and clinical experience, it is reasonable to hypothesize that HCE consultants would have similar intuitions. These intuitions, while not providing definitive answers by any means, should not be discarded out of hand. Research on the moral intuitions of patients, providers, and consultants is necessary before drawing definitive conclusions about whether consultants possess more nuanced moral intuitions, and whether these intuitions are based on their clinical experience with morally challenging cases. Nonetheless, the hypothesis seems compelling to me, and consistent with the SIM and notions of expertise that exist elsewhere in healthcare.

HCEC expertise could also potentially relate to the automatization of Links 5 and 6 in the SIM. As Fine argues in her critique of the SIM, there is evidence in automaticity research that conscious deliberative processes can be “automatized” over time after repeated intentional use.<sup>36</sup> It can therefore be reasonably hypothesized that clinical experience conducting consultations could “automatize” Links 5 and 6 in the SIM, making HCE consultants more likely to partake in deliberative reasoning than the layman.

While these skills would not make consultants the moral authority (i.e., the authoritarian approach) because we all tend to be biased in our search for evidence, it would give consultants *some* authority: enough authority to be able to offer an opinion that is worth considering. This would lend support to the ethics facilitation approach, where consultants are included in the moral network and are able to offer their expert opinions, rather than the pure consensus approach, where consultants only facilitate discussion and build consensus.

## Summary

In this chapter, I first summarized three approaches to HCEC: the authoritarian approach, the pure consensus approach, and the ethics facilitation approach. Second, I discussed each of these approaches in light of the SIM. The authoritarian approach should be rejected because it is prone to biased moral judgments. The pure consensus approach and ethics facilitation approaches both encourage discussion and seeking group consensus, which helps reduce the risk of biased moral judgments. However, the two approaches differ in where the consultant fits into the SIM. In the pure consensus approach, the consultant

solely facilitates the interpersonal links in the SIM, but refrains from expressing their own personal intuitions, judgments, and reasoning. In the ethics facilitation approach, the consultant is still responsible for facilitating the interpersonal links in the SIM, but is allowed to express their own personal intuitions, judgments, and reasoning: they are included within the moral network.

Finally, I hypothesized that if HCE consultants possess expertise warranting their inclusion in the moral network, it is likely to be related to moral intuitions. Through extensive clinical experience with morally challenging cases, consultants could develop moral intuitions that pick up on subtle differences and gradations between cases, offering insights that others would miss. Furthermore, it may be that Links 5 and 6 in the SIM could become “automatized” based repeated intentional use during training. Should these hypotheses prove correct, consultants should be able to offer expert opinions, as long as these recommendations are understood to be opinions and not authoritative judgments.

## Conclusion

The central idea of this paper, the idea that moral reasoning and moral theories are not as useful as I was taught in my first ethics class, began emerging halfway through my first semester of my bioethics masters program. Each class period focused on one particular topic in bioethics. During class, we would sit around the table and discuss that day's topic in bioethics. Is abortion right or wrong? Should drug companies be able to pay people to be subjects in their research? Is our organ donation system fair for everyone?

The results of these sessions surprised me, and were incredibly frustrating. We were all masters students. We all understood and could use the same theories. We were all smart enough to apply them to whatever topic we were discussing. Yet, even when we used the same moral theories, we still disagreed! It made no sense to me. Aren't moral theories how people figure out what to do? If they are, why can't we agree?!

Around this same time, the 2012 presidential election and all its rhetoric was in full force. Democrats and Republicans were at odds with each other over what was best for the nation and who should lead it for the next 4 years. Yet nobody seemed to be able to change each other's minds. How could people disagree so passionately about national debt, the proper scope of social services, and the war in the Middle East, yet still be really nice people who genuinely care about each other as soon as they stop talking about politics? It's not because they aren't smart, or because they aren't thinking clearly. Both sides have sound arguments, yet neither side can sway the other. How can this be?



The potential answer came to me while shadowing the healthcare ethics consultation (HCEC) service at my university's hospital that fall. The morning before the afternoon consult, I reviewed a short synopsis of the case and spent the next several hours on Google Scholar, reading up on the relevant moral theories. I thought about each of Beauchamp and Childress' four biomedical principles, and what each principle suggested about the case. I felt confident in my understanding, and arrived at the consult with a pretty good idea about what ought to be done.

But to my surprise, and in spite of my productive morning, not a single person at the consult, not *one*, based their judgments off of a moral theory. Nobody talked about what theory X suggests we should do, or why we should trust theory A over theory B in this circumstance. People talked about what the patient's current status, the options going forward, and what each of those options meant for each of the parties involved medically, socially, spiritually, and otherwise. And as people talked, they came to understand where the other side was coming from, even if they didn't necessarily agree on what should be done. Any discussion of moral theories was peripheral to the discussion about what actually should be done.

I realized then that what was causing me such frustration related to my assumptions about *how* people figured out what ought to be done. My view of ethics was much like Bobby Fischer's view of chess: "The object is to crush the opponent's mind." If you could use the right theory in the right way, you could force your opponent to crumble to their knees, confess their folly, and agree with

you. What distressed me was that my view of how people figured out what ought to be done was not what I was seeing in the real world.

I realized that maybe it was *my assumption* about how people made moral judgments that was wrong, not the way that people applied moral theories.

Maybe people don't *actually* (or at least *usually*) use moral theories when they make their moral judgments. This idea opened a new door for me, and I was surprised to find that others too, both in psychology and in philosophy, had found support for this exact conclusion.

Which brings us to this paper. I have argued first that HCEC is at a critical juncture in its history, and is taking its first steps toward professionalization. In order to advance down this path, several requirements must be met. First, consultants must identify how HCEC is best practiced. Second, HCEC educators must determine which knowledge and skill bases are necessary to implement an effective HCEC, so that they can best educate future and current consultants. I then argued that discussing these two requirements necessitates a discussion about the assumptions we make about the nature of morality. What is moral knowledge, and how is it obtained? How do people use moral knowledge to make moral judgments? Because these assumptions influence how HCE consultants practice, it is important to answer these questions as accurately as possible.

I then presented two contrasting views of *morality*, which Margaret Urban Walker's describes as the theoretical-juridical model (TJM) and the expressive-collaborative model (ECM). The TJM views morality as an attempt to

approximate timeless, universal moral truths into rationally codifiable laws, procedures, or principles to guide individual behavior. Conversely, the ECM describes morality as a human social phenomenon that arises out of ongoing negotiations between people over responsibilities. Because the question of which model best represents the nature of moral knowledge is a descriptive question, I suggested that evidence from the sciences might contribute to this philosophical debate.

I proceeded to present evidence that moral reasoning plays less of a role in our initial moral judgments than typically thought, and that emotional intuitions play more of a role than we would like to admit. Affective processing research suggests that preference need no inferences, or that people can make emotional evaluations of something without first understanding what that thing is like. Research on automaticity suggests that much, if not most, of our decisions happen automatically and unconsciously, unless we make conscious effort to control that decision. Neuroscience provides proof that emotional centers of the brain are involved in moral judgments, and in fact are recruited first. Cultural psychology suggests that we should strive for universalism without uniformity when describing morality, accounting for human variation without sacrificing our common humanity. Evolutionary psychology and primatology achieve this goal, both suggesting that morality is an adaptive process, developed over millions of years, in response to the challenges inherent to social life. Moral diversity represents different approaches to solving these common challenges.

I then presented a model of moral judgment that addresses these domains of research: the social intuitionist model (SIM). The first major claim of the SIM is that an individual's initial moral judgments are caused by moral intuitions, followed by post hoc moral reasoning. The second major claim is that moral judgment is an ongoing social process. People in the same community create moral networks, where they express their judgments and use their moral reasoning in an ongoing attempt to justify their positions and persuade others to endorse their views.

Returning to Margaret Urban Walker's work on the nature, source, and justification of moral knowledge, I argued that the SIM suggests that the ECM more accurately describes the nature of morality than the TJM. The fact that an individual's moral judgments are more often made based on intuition, and not by rationally applying moral theories, undermines a central tenant of the TJM. Furthermore, the ECM recognizes that morality is an ongoing social phenomenon arising out of the challenges inherent to social life.

Finally, I first summarized three commonly discussed approaches to HCEC: 1) the authoritarian approach, 2) the pure consensus approach, and 3) the ethics facilitation approach. After describing these three approaches, I discussed each approach in light of the SIM. The authoritarian approach should be rejected because it is prone to biased moral judgments. Both the pure consensus approach and ethics facilitation approaches are compatible with the SIM because they recognize the interpersonal nature of moral judgments, and help reduce the risk of biased moral judgments. However, the two approaches

differ in where the consultant fits into the SIM. In the pure consensus approach, the consultant solely facilitates the interpersonal links in the SIM, but refrains from expressing their own personal intuitions, judgments, and reasoning. In the ethics facilitation approach, the consultant is still responsible for facilitating the interpersonal links in the SIM, but is allowed to express their own personal intuitions, judgments, and reasoning: they are included within the moral network.

I finish by hypothesizing that if HCE consultants possess expertise warranting their inclusion in the moral network, it is likely to be related to moral intuitions, rather than a better ability to apply moral theories. Through extensive clinical experience with morally challenging cases, consultants could develop moral intuitions that pick up on subtle differences and gradations between cases, offering insights that others would miss. Additionally, the deliberative reasoning links in the SIM could become “automatized” through repeated intentional use. If these hypotheses prove correct, consultants should be able to offer expert opinions, as long as these recommendations are understood to be opinions and not authoritative judgments.

The culmination of this paper point to an education program for HCE consultants heavily focused on clinical experience. The practical skills necessary to create an environment where the interpersonal links in the SIM function seamlessly takes practice, and the only way to learn these skills is to see them implemented and to practice them repeatedly. Furthermore, if it were true that HCE consultants can develop more sensitive moral intuitions, the ability to empathize through their experience with morally challenging cases, or

automatize the deliberative reasoning links in the SIM, clinical experience would be of even greater importance for education future consultants.

Finally, I wholeheartedly recommend educating future HCE consultants about moral philosophy and moral theories, as long as that education is done with the SIM in mind. Moral theories, and the ability to reason with them, do not offer unique access to some timeless moral truth. Nonetheless, moral theories are clear manifestations of a culture's history and represent ideas that are central to a culture's moral fabric. While theories of justice or autonomy may not tap into some abstract moral truth, these theories do demonstrate recognize that these ideas are highly valued in Western society. The principle of autonomy is not the cause of our cultural ideals of individualism and independence. In fact it is quite the opposite: the principle of autonomy arises out of our ideals of individualism and independence. HCE consultants should therefore of course learn about moral theories and principles, but with the understanding that those theories arise out of the social and cultural movements that lead to their development, rather than through abstract logical deduction that is often purported to undergird them.

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